

# Office of Special Education

# Indicator 10 Monitoring and Compliance Guide



# Office of Special Education

# **Table of Contents**

Indicator 10: Disproportionate Representation in Specific Disability Categories	3
Monitoring Cycle	3
Yearly Review Cycle	4
State Targets	4
LEA Findings and Release Criteria	4
Indicator 10 Finding Identification	4
Finding Release Criteria	5
Correction of Noncompliance and Tiered Support	Ę
Tier One: LEAs with New Findings	5
Tier Two: LEAs in Year 2 Findings	5
Tier Three: LEAs with Longstanding Findings	5
Results Driven Accountability (RDA)	6
Technical Assistance	6

# Indicator 10: Disproportionate Representation in Specific Disability Categories

#### **Definition**

Percentage of districts with disproportionate representation of racial/ethnic groups in specific disability categories due to inappropriate identification.

#### **Monitoring Cycle**

As part of the Indiana Department of Education's (IDOE's) integrated monitoring system, local educational agencies (LEAs) are monitored for Indicator 10 compliance. Data that LEAs submit is monitored to identify whether the rate of overall special education identification of a racial or ethnic group of students in a specific disability category compared to all other racial or ethnic groups is disproportionate. Disproportionality is identified by comparing if the rate at which a particular racial or ethnic group of students is identified as students with disabilities for a specific category is double or higher than all other racial or ethnic groups of students who identified as students with disabilities for the same category of disability in the LEA for three consecutive years.

Comparisons are made using a risk index. The risk index is the percentage of students from a particular racial or ethnic group who are identified as students with a specific disability. The risk index for a particular racial or ethnic group is compared to the risk index for all other students. "All other students" means all students in the other racial or ethnic categories. For example, in determining if there is a disproportionate representation for white students with Autism, "all other students" would be all students with Autism who are not white.

The threshold of the values is 2.0 or greater and the cell size is 15 for three years in a row for Indicators 9 and 10. The three most recent school years were 2019-2020, 2020-2021, and 2021-2022. The six disability categories monitored are Cognitive Disability (CD), Emotional Disability (ED), Specific Learning Disability (SLD), Language/Speech Impairment (LSI), Other Health Impairment (OHI) and Autism (AUT). If the LEA exceeds the numerical criteria, the self-assessment survey and file review are administered to determine if disproportionate representation is due to inappropriate identification.

#### **Yearly Review Cycle**

In the spring of each year, an Indiana Disproportionality Resource Center (IDRC) project statistician will examine data provided by IDOE and check the integrity of data sets and develop a database for analysis purposes. LEAs that are identified in the analysis with a risk ratio that exceeds the state criteria for three years are flagged. By the end of February, the preliminary data is sent to the identified LEAs for review with a notification that in May, a file, policy, and procedure review will take place and a Self-Assessment from the school will be initiated. In May, IDRC will contact the identified LEAs with information regarding their review and will then randomly select files for review. IDRC will then meet with the LEAs and determine which STNs meet the criteria for review and compile a final list for the file review. By November, the file review team will meet and determine which LEAs are out of compliance, are in continued noncompliance, and/or longstanding noncompliance for Indicator 10 for Results Driven Accountability (RDA). In December, those LEAs with identified noncompliance will attend a regional review meeting for Technical Assistance.

# **State Targets**

Indicator 10 - Disproportionate Representation in Specific Disability Categories							
Target Year	2020	2021	2022	2023	2024	2025	
Target Data	0%	0%	0%	0%	0%	0%	

# **LEA Findings and Release Criteria**

#### **Indicator 10 Finding Identification**

An identified LEA must exceed the minimum risk ratio for three consecutive years. For Indicator 10, that means that for an identified LEA it has been determined that students of a particular race or ethnic group are identified as having disabilities of a specific category at a rate that is at least twice as high as the statewide rate for three consecutive years. Following this determination, IDRC will then utilize the STNs that met the file review criteria in those districts to determine whether the disability determination was appropriate for those students or not. This determination is based on evidence provided by each district to show that the determination was made utilizing a wide and varied assortment of information provided by the multidisciplinary team members.

## **Finding Release Criteria**

In order to be released from an Indicator 10 finding, all individualized education programs (IEPs) that were found to have noncompliance must be corrected and the correction verified by an IDOE Special Education Specialist. The LEA must also complete and submit all the necessary components of the RDA Planning Tool. If it is determined that technical assistance and/or professional development is needed, an LEA must verify that they have attended at least one of the provided sessions. Once each of these has been completed, a formal release from findings is provided to the special education director and superintendent.

# **Correction of Noncompliance and Tiered Support**

### Tier One: LEAs with New Findings

Tier One technical assistance is provided when an LEA has been identified to have a new finding. All LEAs in Tier One will complete RDA and focus on five success gap areas prior to training with IDRC. They will also develop a Targeted Action Plan to address these Success Gaps contributing to the area of noncompliance and identify indicators of progress using the provided Data Tracking Tool. IDRC will meet virtually quarterly, at least three times per school year, to review progress and revise the plans as needed. In the initial meeting with IDRC the rubric will be reviewed with the school and subsequent meetings will focus on the data and the tracking of action items in the Targeted Action Plan and tracking tool.

# Tier Two: LEAs in Year 2 Findings

Tier Two technical assistance is provided to LEAs that are in their second year of findings. All LEAs in Tier Two will submit a Targeted Action Plan to IDRC for review prior to the required training. IDRC will provide individualized feedback to the LEA utilizing the rubric for the Targeted Action Plan. LEAs will also be required to submit their Data Tracking Tool quarterly and meet with IDRC virtually quarterly, at least three times per school year, to review and revise the plans as needed.

## Tier Three: LEAs with Longstanding Findings

Tier Three technical assistance is provided to LEAs with longstanding findings of three or more years. All technical assistance in this tier is individualized to better assist the school in meeting requirements for release from findings. IDRC will meet with the LEA

to assist in developing a Targeted Action Plan that addresses each concern identified. IDRC will then meet with the LEA monthly to check progress of the Targeted Action Plan, discuss system barriers, discuss data tracking, and revise the plan as needed.

# **Results Driven Accountability (RDA)**

When a corporation meets the target for a particular compliance indicator, they are considered "compliant" and are assigned a score of 5. If the corporation has a "finding of noncompliance" for an indicator, the corporation is assigned a score of 1.1

Category Weights for Compliance Index				
Category	Percentage Weight			
Indicator 4B	8%			
Indicator 9	8%			
Indicator 10	8%			
Indicator 11	22%			
Indicator 12	22%			
Indicator 13	22%			
Continued Noncompliance	5%			
Longstanding Noncompliance	5%			
Total	100%			

### **Technical Assistance**

Level	Resources		
Universal	Request Technical Assistance with the Office of Student Support and Accessibility using this form.		
Targeted			
Intensive			

<sup>&</sup>lt;sup>1</sup> If the compliance target (100% or 0%) is not met for the compliance indicators, the corporation is out of compliance and must correct the noncompliance within one year. For Indicators 11, 12, and 13, a corporation is designated as "substantially compliant" for the indicator and will receive a score of 5 if their compliance falls within a range of 95% - 100%. "Substantial compliance" is still considered a finding and must be corrected.